FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076 Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

			[P	lease read ins	Structions belon	- Compression									
SECTION 1 - General Information	10000000											1			
DeKalb Telephone Cooperative, Inc. (dba DTC Communications) 111 High Street, PO Box 247, Alexandria, TN 37012												Check here if this is a change of address.			
2. Year Report Filed	Reporting Period Cor	Period (Endir vered by Rep	ng Date of Pay			4. Number of Full-Time Employees during Selected Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, and V only) 1. Fewer than 16 (complete Sections I) (V, and V only)									
2017	5	Marci	19, 20	1 /			b. 16 or more (complete all sections)								
SECTION II - Full-Time Employees							(Report empl	ber of Employ oyees in only o	ne category)						
lab	Race/Ethnicity														
Job Categories		anic or					Not-Hispanic or Latino							Total Columns	
1000 111	La	atino			Ма	le				Female A - N					
4	Male	Female	177	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	Indian or Alaska Native	races	
	A	В	С	D	E	F	G	н	1	J	К	L	М	N	0
Executive/Senior Level			4						1			N			5
Officials and Managers			-						1						5
First/Mid-Level Officials and 1.2 Managers			4					-							12
Professionals 2			8						4						10
Technicians 3			9						1						17
Sales Workers 4	3		1						16						13
Administrative Support 5 Workers			0						13						12
Craft Workers 6			11	1					0						0
Operatives 7			0						0						4
Laborers and Helpers 8			4						0						0
Service Workers 9			0		50.00		-	0	36	0	0	0	0	0	78
TOTAL 10	0	0	41	1	0	0	0	0	38	-		ogrik,	42		81
PREVIOUS YEAR TOTAL 11			42	1					36						FCC

SECTION III - Part-Time Employees.																		
	Number of Employees (Report employees in only one category)																	
E-Lo		Race/Ethnicity																
Job Categories		Hispanic or Latino			Not-Hispanic or Latino													
				Male Female												Columns A - N		
		Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races			
		Α	В	С	D	E	F	G	Н	Ĺ	J	К	L	М	N	0		
Executive/Senior Level Officials and Managers	1.1															0		
First/Mid-Level Officials and Managers	1.2															0		
Professionals	2															0		
Technicians	3															0		
Sales Workers	4															0		
Administrative Support Workers	5									I						1		
Craft Workers	6															0		
Operatives	7															0		
Laborers and Helpers	8															0		
Service Workers	9															0		
TOTAL	10	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1		
PREVIOUS YEAR TOTAL	11									1						1		
SECTION IV - Report of Disc	rimin	ation Compl	laints Pursua	ent to 47 CFF	R 22.321, 23.5	55, 90.168, 10°	1.4, and 101	.311.										
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.																		
SECTION V - Certification I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.																		
Date	Typed or Printed Name of Person Signing							Signature // / /							Telephone No.			
05/30/2017	10.000	Christopher E. Townson						EMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISON							(615) 464-2271			
Title of Person Signing CEO	WILLFULLY OF ANY ST	FALSE STAT ATION LICEN	EMENTS M SE OR CON	ADE ON THIS	PERMIT (47	PUNISHABL U.S.C. 312 (/	E BY FINE A A)(1) AND/OF	ND/OR IMPRI R FORFEITUR	SONMENT (E (47 U.S.C.	18 U.S.C. 100 503).)1) AND/OR R	EVOCATION						